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SUBJECT: ARMENIA: IMPLEMENTATION OF THE BERLIN DECLARATION
ON TB

REF: STATE 6989

¶1. Pursuant to reftel request, post reports the following on the status of implementation in Armenia of the Berlin Declaration on Tuberculosis.

¶2. On 27 February Embassy Officers attended a meeting with the National Tuberculosis Program Manager Vahan Pogonian and his deputy Tatevik Kostanian to discuss Armenia's implementation of its World Health Organization (WHO) obligations as outlined in the Berlin Statement on Tuberculosis. At the meeting, Pogonian provided Emboffs with a historical background of the National TB Program (NTBP) in Armenia and its major accomplishments to date. The current NTBP is the second phase of a program created with WHO assistance to eradicate Tuberculosis in Armenia over 2007-2015. The first phase of this program was successfully completed during the 2003-2006 time frame. As a result, the NTBP closely follows the WHO's "Stop TB Strategy" for high priority countries in the WHO European Region.

ACCOMPLISHMENTS

¶3. According to Pogonian, the Armenian NTBP has succeeded in implementing several of the steps outlined in paragraph five of the Berlin Statement. These include but are not limited to: 1) The establishment of a Country Coordination Mechanism made up of representatives of the various stakeholder ministries and NGOs and which meets quarterly to discuss TB developments in Armenia; 2) The training of primary care providers on modern TB treatment strategies; 3) The building of a new hospital that specializes in the treatment of man-made multidrug-resistant TB (MDR-TB); and 4) The establishment of regional TB treatment centers throughout Armenia. In addition, the Armenian NTBP is pursuing joint projects with its Georgian counterpart under the leadership of Georgia's First Lady.

¶4. Pogonian regretted to inform Emboffs that there has been virtually no private sector or civil society involvement in the fight against TB in Armenia. However, he was pleased to report on the successes of a pilot project that his organization was pursuing with the French NGO Medecins Sans Frontieres (MSF) to treat MDR-TB. In addition, he stated that NTBP-Armenia was receiving support from the German government, the Global Fund (to Fight Aids, TB, and Malaria), the International Red Cross, the United Methodist Committee on Relief (UMCOR), and local NGO "Save the Children from TB". (Embassy comment: USAID has provided the Government of Armenia with over 200,000 USD in technical assistance).

¶5. Concerning collaboration between Armenia's TB and HIV programs, Pogonian noted that he was also head of the

National HIV Action Plan (NHAP) and that Country Coordination Mechanism for TB was also used to address the tandem treatment plans for those with TB and HIV.

CHALLENGES

¶6. Armavir and Syunik Marzes (regions) experienced a relatively higher number of registered cases recently, which Pogosyan partially attributed to the lower economic status of the inhabitants. A significant number of new MDR-TB cases were registered within Armenia's prison population. Currently, treatment is not compulsory. However, those infected are provided free treatment and severe cases are sent to Yerevan for further treatment. In addition, free diagnostic services are provided to people who have been exposed.

¶7. While the number of new TB cases registered in Armenia has not exceeded the 1500 per-year mark for the past couple of years, the percentage of cases registered with MDR-TB has increased significantly. According to Pogosian, this was due to an increase in human error during the treatment of regular TB. By training primary care providers on new TB treatment strategies, Pogosian hoped to decrease the total number of registered cases as well as address the human resource shortfall in TB treatment. Pogosian also mentioned that the NTBP expected a budget gap of seven million USD for the building of a new hospital specially equipped to treat MDR-TB and that he would be applying to the G-8 for assistance.

PERSPECTIVES OF THE WHO PROGRAM MANAGER FOR ARMENIA

¶8. Emboffs met with the WHO Program Manager for Armenia, Gayane Ghukasian, who reported that the NTBP had a 72 percent successful treatment rate using the Directly Observed

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Treatment Shortcourse (DOTS) strategy, whereas the WHO standard for treatment was 80 percent. Ghukasian stated that despite attempts to integrate DOTS into the general healthcare system, the situation remained alarming due to a high number of recidivating cases. She attributed part of the problem to public perceptions of TB as a stigma, causing many of the infected to hide their diagnosis. She also assessed the level of collaboration between TB and HIV programs to be insufficient, and noted that funding from the Global Fund Grant (GFG) would run out by the end of 2009.

¶9. Ghukasian made the following recommendations: 1) The NTBP is a comparatively new structure and needs to improve its capacity, management, and staffing due to high turnover; 2) The NTBP needs to address the lack of public awareness that TB is a problem in Armenia; 3) The Armenian government needs to review Medical School curricula as well as the methods of practicing physicians to treat TB; and 4) Armenia must develop a sustainable means to fund its TB action plan for the future when international sponsors are gone.

¶10. COMMENT: Given that the percentage of the federal budget Armenia dedicates to health care spending is one of the lowest of all CIS countries, post is concerned that the government is not taking the spread of TB and MDR-TB seriously. Moreover, new cases of TB are believed to be under-reported among the child population due to the high number of children in rural areas who are not even registered within the health care system and who therefore do not get diagnosed until they begin school.

PENNINGTON